



PATENT
Docket No.312762002400

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U.S. 58
Irina Britva

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of:

Norimitsu SAITO and Ming ZHAO

Serial No.: 09/734,786

Filing Date: December 11, 2000

For: METHODS FOR INTRODUCING
GENES INTO MAMMALIAN
SUBJECTS

Examiner: To be Assigned

Group Art Unit: 1645

TRANSMITTAL

BOX SEQUENCE
Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

Attached hereto for filing are the following:

1. Response to Notice to comply
2. Copy of Notice to comply
3. Paper copy of the Sequence Listing
4. A computer readable form copy of the Sequence Listing on
CD-R (CRF COPY)
-Machine format: IBM PC COMPATIBLE
-Operating system: PC-DOS/MS-DOS

-File contained on CD: 3127620024.txt
-Date recorded: April 16, 2002

5. Postcard

In the unlikely event that the Patent Office determines that extensions and/or other relief is required, applicant petition for any required relief including extensions of time and authorize the Assistant Commissioner to charge the cost of such petitions and/or fees due to our Deposit Account No. 03-1952 under Order No. 312762002400. The Assistant Commissioner is not authorized to charge the cost of the issue fee to the Deposit Account.

Respectfully submitted,

Dated: April 17, 2002

By: Kate H. Murashige
Kate H. Murashige
Registration No. 29,959

Morrison & Foerster LLP
3811 Valley Centre Drive, Suite 500
San Diego, CA 92130-2332
Telephone: (858) 720-5112
Facsimile: (858) 720-5125



Docket No.: 31276-20024.00	Atty: Kate H. Murashige
Serial No.: 09/734,786	Filing Date: December 11, 2000
Title: METHODS FOR INTRODUCING GENES INTO MAMMALIAN SUBJECTS	
Date of Mailing: April 17, 2002	

Papers enclosed herewith:

1. Transmittal (2 pages);
2. Response to Notice to comply (6 pages);
3. Copy of Notice to comply (1 page);
4. Sequence listing - paper copy (2 pages);
5. Sequence listing - computer readable form (CRF copy) (1 CD-R);
6. Return postcard.

Docket No.: 31276-20024.00	Atty: Kate H. Murashige
Serial No.: 09/734,786	Filing Date: December 11, 2000
Title: METHODS FOR INTRODUCING GENES INTO MAMMALIAN SUBJECTS	
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PTO/SB/21 (08-00)
Approved for use through 10/31/2002 OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/734,786	
	Filing Date	December 11, 2000	
	First Named Inventor	Norimitsu SAITO	
	Group Art Unit	1636	
	Examiner Name	D. Sullivan	
Total Number of Pages in This Submission	20	Attorney Docket Number	312762002400

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Copy of Response filed April 17, 2002 Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	MORRISON & FOERSTER LLP Kate H. Murashige - 29,959
Signature	<i>Kate H. Murashige</i>
Date	June 25, 2003

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Dated: 6/25/03 Signature: Tami Procopia (Tami Procopia)



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FEE TRANSMITTAL for FY 2003 <small>Patent fees are subject to annual revision.</small>		Complete if Known	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/734,786
TOTAL AMOUNT OF PAYMENT (\$)		Filing Date	December 11, 2000
160.00		First Named Inventor	Norimitsu SAITO
		Examiner Name	D. Sullivan
		Group Art Unit	1636
		Attorney Docket No.	312762002400
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES	
<input checked="" type="checkbox"/> Deposit Account		Large Entity Small Entity	
Deposit Account Number: 03-1952		Fee Code Fee (\$) Fee Code Fee (\$)	
Deposit Account Name: Morrison & Foerster LLP		Fee Description Fee Paid	
The Commissioner is hereby authorized to: (check all that apply)		1051 130 2051 65 Surcharge - late filing fee or oath	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments		1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet	
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application		1053 130 1053 130 Non-English specification	
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		1812 2,520 1812 2,520 For filing a request for ex parte reexamination	
FEE CALCULATION		1804 920* 1804 920* Requesting publication of SIR prior to Examiner action	
1. BASIC FILING FEE		1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action	
Large Entity Small Entity		1251 110 2251 55 Extension for reply within first month	
Fee Code Fee (\$)	Fee Code Fee (\$)	1252 410 2252 205 Extension for reply within second month	
1001 750 2001 375 Utility filing fee		1253 930 2253 465 Extension for reply within third month	
1002 330 2002 165 Design filing fee		1254 1,450 2254 725 Extension for reply within fourth month	
1003 520 2003 260 Plant filing fee		1255 1,970 2255 985 Extension for reply within fifth month	
1004 750 2004 375 Reissue filing fee		1401 320 2401 160 Notice of Appeal	
1005 160 2005 80 Provisional filing fee		1402 320 2402 160 Filing a brief in support of an appeal	
SUBTOTAL (1) (\$)		1403 280 2403 140 Request for oral hearing	
0.00		1451 1,510 1451 1,510 Petition to institute a public use proceeding	
		1452 110 2452 55 Petition to revive - unavoidable	
		1453 1,300 2453 650 Petition to revive - unintentional	
		1501 1,300 2501 650 Utility issue fee (or reissue)	
		1502 470 2502 235 Design issue fee	
		1503 630 2503 315 Plant issue fee	
		1460 130 1460 130 Petitions to the Commissioner	
		1807 50 1807 50 Processing fee under 37 CFR 1.17(q)	
		1806 180 1806 180 Submission of Information Disclosure Stmt	
		8021 40 8021 40 Recording each patent assignment per property (times number of properties)	
		1809 750 2809 375 Filing a submission after final rejection (37 CFR 1.129(a))	
		1810 750 2810 375 For each additional invention to be examined (37 CFR 1.129(b))	
		1801 750 2801 375 Request for Continued Examination (RCE)	
		1802 900 1802 900 Request for expedited examination of a design application	
		Other fee (specify)	
		*Reduced by Basic Filing Fee Paid	
		SUBTOTAL (3) (\$)	
		160.00	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			
Total Claims ** = Extra Claims Fee from below Fee Paid			
Independent Claims ** = Extra Claims Fee from below Fee Paid			
Multiple Dependent ** = Extra Claims Fee from below Fee Paid			
Large Entity Small Entity			
Fee Code Fee (\$)	Fee Code Fee (\$)	Fee Description	
1202 18 2202 9 Claims in excess of 20			
1201 84 2201 42 Independent claims in excess of 3			
1203 280 2203 140 Multiple dependent claim, if not paid			
1204 84 2204 42 ** Reissue independent claims over original patent			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2) (\$)			
0.00			
**or number previously paid, if greater. For Reissues, see above			

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Kate H. Murashige	Registration No. (Attorney/Agent)	29,959
Signature	<i>Kate H. Murashige</i>	Telephone	(858) 720-5112
		Date	June 25, 2003

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